

(NPS Form 10-930)
(OMB No. 1024-0026)
(NEW 10/00)
(Expires 3/31/2010)

National Park Service
Tuskegee Airmen National Historic Site
1616 Chappie James Blvd.
Tuskegee, Alabama 36083



334-724-0922

Application for Special Use Permit

Please supply the information requested below. **Attach additional sheets, if necessary, to provide required information.** Allow **AT LEAST** 4 business days for processing (2 business days for First Amendment requests). A non-refundable processing fee should accompany this application unless the requested use is an exercise of a First Amendment right. You will be notified of the disposition of the application and the necessary steps to secure your final permit. Your permit may require the payment of cost recovery charges and proof of liability insurance naming the United States of America as also insured.

Applicant Name:	Organization Name:
Social Security #:	Tax ID #
Street/Address:	Street/Address:
City/State/Zip Code:	City/State/Zip Code:
Telephone #:	Telephone #:
Cell phone #:	Cell phone #:
Fax #:	Fax#:
E-mail:	E-mail:

Description of Proposed Activity (attach diagram, attach additional pages if necessary):

Requested Location: _____

Date(s): _____

Event set up will begin: (date and time)	Event will begin: (date and time)	Event will end: (date and time)	Removal will be done: (date and time)

Maximum Number of Participants _____ (Please provide best estimate)

Maximum Number of Vehicles _____ (attach parking plan)

Support Equipment (list all equipment; attach additional pages if necessary)

List support personnel (contractors, etc. including addresses and telephones attach additional pages if necessary) _____

Individual in charge of event on site (include address, telephone and cell phone numbers): _____

Is this an exercise of First Amendment Rights?	<input type="checkbox"/> Y	<input type="checkbox"/> N
Are you familiar with/ have you visited the requested area?	<input type="checkbox"/> Y	<input type="checkbox"/> N
Have you obtained a permit from the National Park Service in the past?	<input type="checkbox"/> Y	<input type="checkbox"/> N
(If yes, provide a list of permit dates and locations on a separate page.)		
Do you plan to advertise or issue a press release before the event?	<input type="checkbox"/> Y	<input type="checkbox"/> N
Will you distribute printed material?	<input type="checkbox"/> Y	<input type="checkbox"/> N
Is there any reason to believe there will be attempts to disrupt, protest or prevent your event?(If yes, please explain on a separate page.)	<input type="checkbox"/> Y	<input type="checkbox"/> N
Do you intend to solicit donations or offer items for sale?		
(These activities may require an additional permit.)		
	<input type="checkbox"/> Y	<input type="checkbox"/> N

The applicant by his or her signature certifies that all the information given is complete and correct, and that no false or misleading information or false statements have been given.

Signature _____ Date _____

Information provided will be used to determine whether a permit will be issued. Completed application must be accompanied by an application fee in the form of a cashiers check or money order in the amount of \$00.00 made payable to **National Park Service**. Credit card payments may be accepted at some parks. Application and administrative charges are non-refundable. *This completed application should be mailed to FEE WAIVED at the Park address found on the first page of this application.*

Note that this is an application only, and does not serve as permission to conduct any use of the park. If your request is approved, a permit containing applicable terms and conditions will be sent to the person designated on the application. The permit must be signed by the responsible person and returned to the park prior to the event for final approval by the Park Superintendent.

The above application form is provided with the understanding that parks will insert appropriate park names and addresses and the amount of the application fee as desired.

Paperwork Reduction Act Statement: This information is being collected to allow the park manager to make a value judgment on whether or not to allow the requested use. All the applicable parts of the form must be completed. A Federal agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Estimated Burden Statement: Public reporting burden for this form is estimated to average 30 minutes per response including the time it takes to read, gather and maintain data, review instructions and complete the form. Direct comments regarding this burden estimate or any aspects of this form to the National Park Service, Special Park Uses Program Manager, 1849 C Street NW (2460), Washington, D.C. 20240

UNITED STATES DEPARTMENT OF THE INTERIOR
National Park Service

Special Use Permit

Name of Use _____

Date Permit Reviewed 20__

Reviewed 20__

Reviewed 20__

Expires 20__

Long Term _____

Permit # _____

Short Term _____

Region Park Type No.#

Name of Area

Name of Permittee

Address

Phone

is hereby authorized during the period from (Time __:__ day__ Month __ 20__), through

(Time __:__ day__ Month__ 20__), to use the following described land or facilities in the above named area:

For the purpose(s) of:

Authorizing legislation or other authority : _____

NEPA Compliance: CATEGORICALLY EXCLUDED __ EA/FONSI __ EIS __ OTHER APPROVED PLANS _____

PERFORMANCE BOND: Required _____ Not Required __ Amount \$ _____

LIABILITY INSURANCE: Required _____ Not Required __ Amount \$ _____

ISSUANCE of this permit is subject to the conditions on the reverse hereof and appended pages and when appropriate to the payment to the U.S. Department of the Interior, National Park Service of the sum of \$ _____.

The undersigned hereby accepts this permit subject to the terms, covenants, obligations, and reservations, expressed or implied herein.

PERMITTEE _____
Signature _____ Date _____

Authorizing Official _____
Signature _____ Superintendent _____ Date _____

Authorizing Official _____
(additional if required) Signature _____ Title _____ Date _____

CONDITIONS OF THIS PERMIT

1. The permittee shall exercise this privilege subject to the supervision of the Superintendent, and shall comply with all applicable laws and regulations of the area.
2. Damages - The permittee shall pay the United States for any damage resulting from this use which would not reasonably be inherent in the use which the permittee is authorized to make of the land described in this permit.
3. Benefit - Neither Members of, nor Delegates to Congress, or Resident Commissioners shall be admitted to any share or part of this permit or derive, either directly or indirectly, any pecuniary benefit to arise therefrom: Provided, however, that nothing herein contained shall be construed to extend to any incorporated company, if the permit be for the benefit of such corporation.
4. Assignment - This permit may not be transferred or assigned without the consent of the Superintendent, in writing.
5. Revocation - This permit may be terminated upon breach of any of the conditions herein or at the discretion of the Superintendent.
6. The permittee is prohibited from giving false information, to do so will be considered a breach of conditions and be grounds for revocation: [RE:36 CFR 2.32(a)(3)].
7. Permittee will comply with applicable public health and sanitation standards and codes.

APPENDIX SPECIAL PARK CONDITIONS SPECIAL USE PERMIT